

**Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions**

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Atascadero			
Division, Department, or Region (if applicable)			
City Manager's Office			
Street Address			
6500 Palma Avenue			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Rachelle Rickard, City Manager		Date of Original Filing: <u>6/1/2015</u>	
Area Code/Phone Number	E-mail	(month, day, year)	
805-470-3400	rrickard@atascadero.org		

2. Function, Event, or Ceremonial Role Information

Title 2015 Mayors' WInemaker Dinner Face Value of Each Admission \$ 85.00

Description Kiwanis Community Fundraiser Date(s) 6/26/15 6/26/15

Ticket(s)/Admission(s) provided by agency? Yes No If no: _____
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: Richard, Rachelle - City Manager
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
O'Malley, Tom - Mayor - City of Atasca	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Host/City Representative at Community Event Income <input type="checkbox"/>
Moreno, Heather - Mayor Pro Tem	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
Fonzi, Roberta - Council Member	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
Kelley, Bob - Council Member	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
Sturtevant, Brian - Council Member	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.


Signature of Agency Head or Designee

Rachelle Rickard

Print Name

City Manager

Title

6/1/2015

(month, day, year)



Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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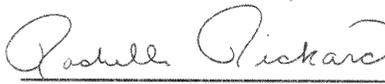
Yes No If yes: Richard, Rachelle - City Manager
Official's Name (Last, First) and Title

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Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> • Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
Rickard, Rachelle - City Manager - City	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
DeBar, Nick	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	City Representative at Community Event Income <input type="checkbox"/>
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 Rachelle Rickard City Manager 6/1/2015
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)